

Nurse Asthma Education

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Nurse Asthma Teaching

- Objectives:
 - Outline drivers
 - Outline training plan
 - Describe teaching package
 - Evaluation of training
 - Going forward

National Drivers

National Review of Asthma Deaths (2014)

NRAD Findings 6.5.2014 'Why asthma still kills:

Failure to recognise known risk factors:

Past admissions (47%); died within 28 days of discharge (10%);
1 A&E attendance in year before death (21%).

Inadequate care:

23% PAAPs; 43% reviewed; 50% trigger factors; 46% followed
guidelines; severity was underestimated (58% mild/mod).

Prescribing inadequacies:

Over Px Relievers; Under Px Preventers

Patient/carer issues:

45% didn't call for or get medical help in final attack); failure to
adhere to medical advice; psychosocial factors – eg depression &
mental health issues (16%), substance abuse (6%), smoking (20%)



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Setting higher standards

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Regional driver



- London children and young people strategic clinical network:
London asthma standards for children and young people - Driving consistency in outcomes for children and young people across the capital (2015)

- Organisation of care
- Patient and family support, information provision and experience
- Out of hospital care
- Schools
- Acute care
- High risk care

- Integration and care co-ordination
- Discharge/care planning
- Transitional care
- Effective and consistent prescribing
- Workforce education and training

Local driver 1

British Thoracic Society BTS National Paediatric Asthma Audit Summary Report (2016)

Recommendations/Quality Improvement Plan

1. Demonstrate an improvement in the proportion of children who are recorded to have been given a **written asthma action plan** (Target in 2 years: 95%)
2. Demonstrate an improvement in the proportion of children advised to see their **GP** within two working days of discharge (Target in 2 years: 95%)
3. Demonstrate a reduction in the use of **CXR**s in children with wheezing/asthma (Target in 2 years: 15%)
4. Demonstrate an improvement in the proportion of children who have exposure to **tobacco smoke** documented within the medical record (Target in 2 years: 80%)

Local driver 1

British Thoracic Society BTS National Paediatric Asthma Audit Summary Report (2016)

<u>Barnet vs national average</u>	<u>Hampstead vs national average</u>
<ul style="list-style-type: none">• More readmissions• More cigarette smokers• Poorer at referring to GP or f/u• Children present slightly sicker	<ul style="list-style-type: none">• More ward admissions• Slightly sicker when they present• Better at asthma plans

Local driver 2

Serious incident (SI)(2016) – Royal Free Hospital Recommendations

- Clinical lead
 - Situational awareness
 - Acute treatment
 - PEFr
 - Tertiary referrals
 - Immediate and later f/u
 - Drive asthma standards

- Set-up asthma clinic
- Patient safety
 - Improve response to parental concerns

Summary



- Inadequate recognition of severity of illness by clinicians and families
- Inadequate discharge education
- Inadequate follow-up
- Inadequate clinical management of chronic condition e.g. relievers/preventer ratio
- Inadequate smoking cessation



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Nurse Asthma Education



Aim:

Train 95% of nurses by mid-March in the following:

- PEFR
- Inhaler technique
- Asthma plans
- Follow-up
- Smoking cessation referrals
- Asthma control test

Preparation

- Late Nov - Senior stakeholders discussed asthma standards
- Early Dec – Training stakeholders discussed training plan
- Mid and late Dec – Trainers trained by Asthma CNS
- Late Dec – Training plan written
- Late Dec – Fact-finding, queries, placebos sourced, Lead CPE developed further teaching resources and clinical resources
- Early Jan – Training commenced



Trainers



- Adama Kargbo, Asthma CNS
- Claire O'Sullivan, Clinical Practice Educator
- Michael Clift, Lead CPE
- Kerry Neate, Allergy CNS
- Ronelle' Miguel, Senior Clinical Practice Educator
- Rachel McCann, Clinical Practice Educator

Teaching package

- 45 to 75 minutes
- 1 to 6 people
- Nurses, HCAs, Students
- 74 staff trained

- Lecture + interactive
- Feedback from hospital teachers (Education project)

1. Asthma quiz

2. Asthma and triggers

3. Smoking cessation referrals

4. Assessment

5. PEFR

6. ACT

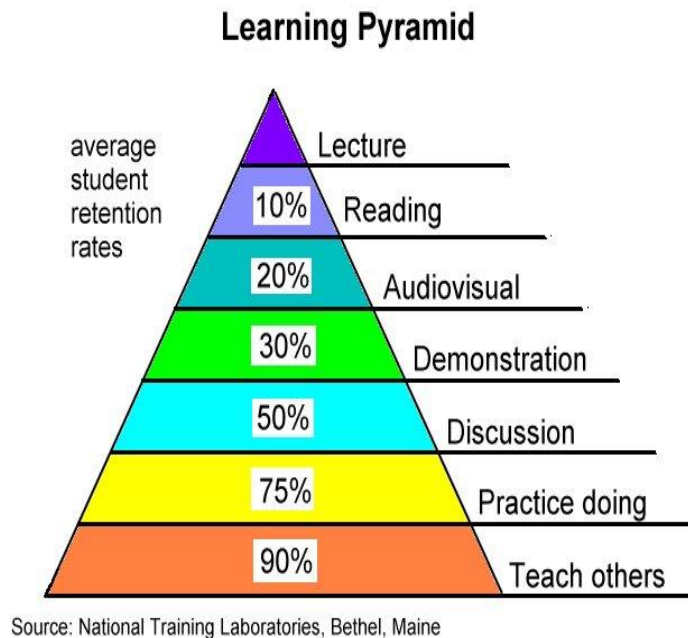
7. Medications

8. Inhalers and spacers

9. Asthma plans and discharge

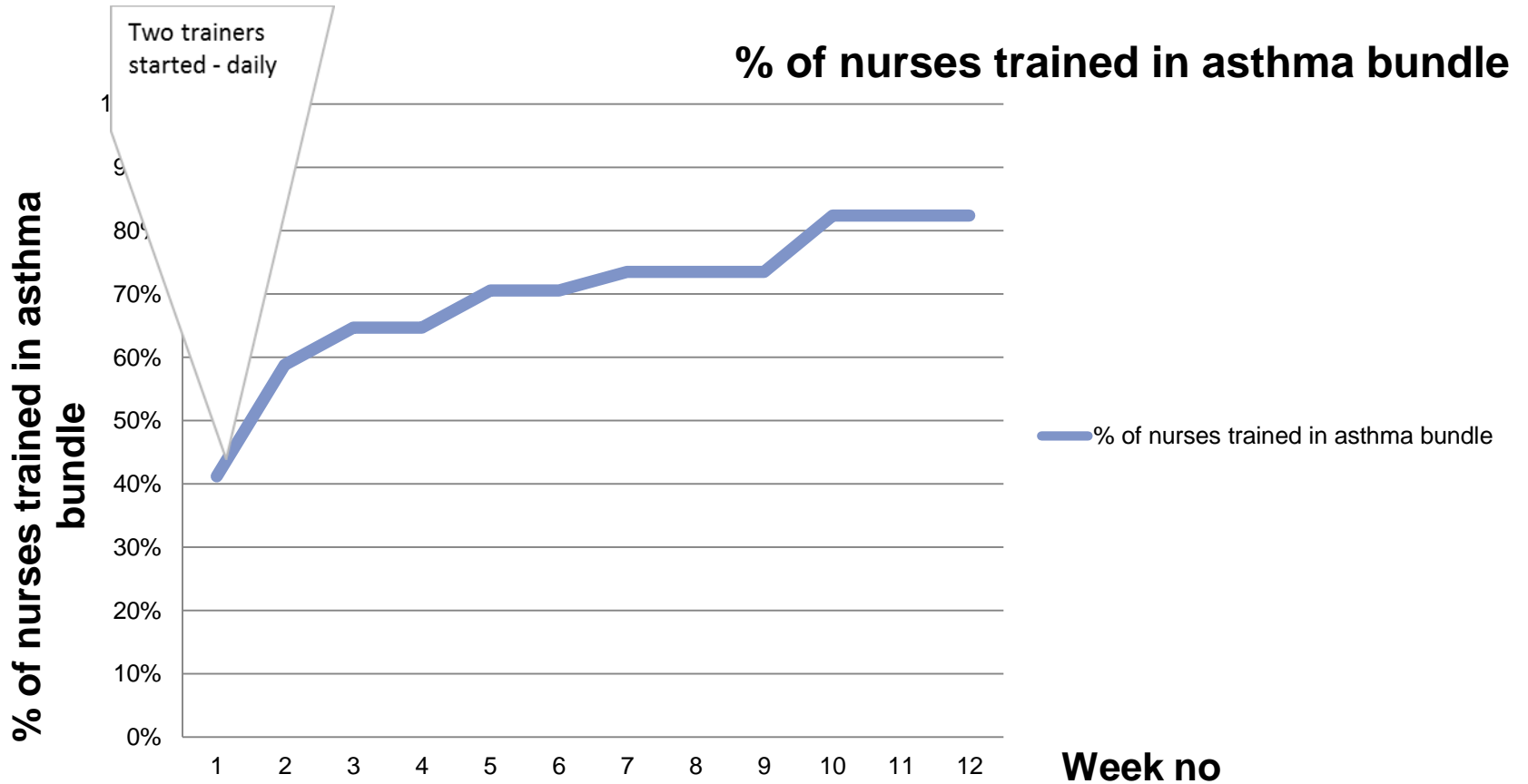
10. Scenarios

Education project

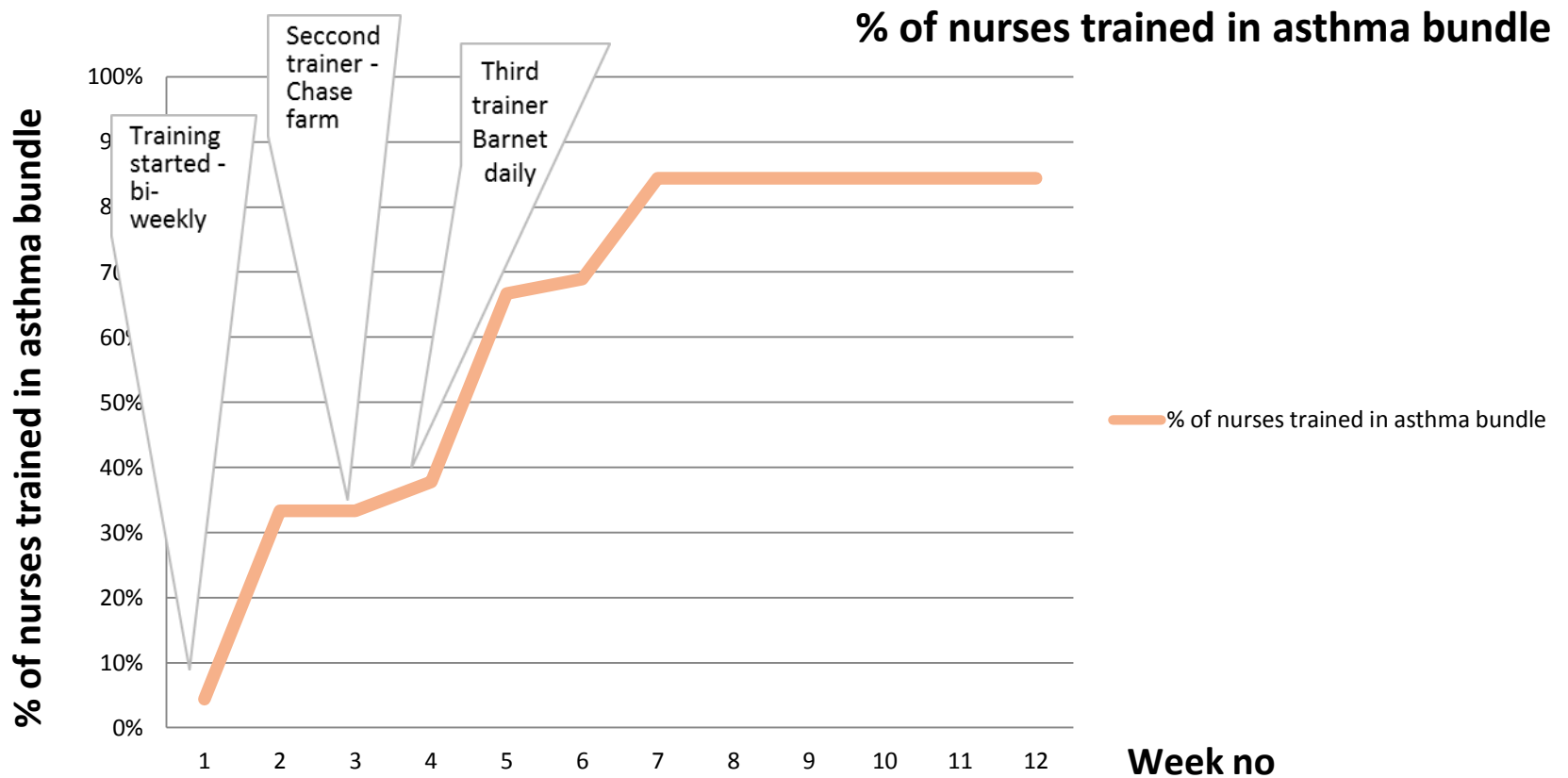


- Improve quality and impact of short small group sessions during clinical shifts
- Use free in-house, at-hand pedagogical expertise
- CPEs observed by hospital schoolteachers
- Verbal and written feedback
- Cross-site
- Multi-centre (UCLH, Barts)

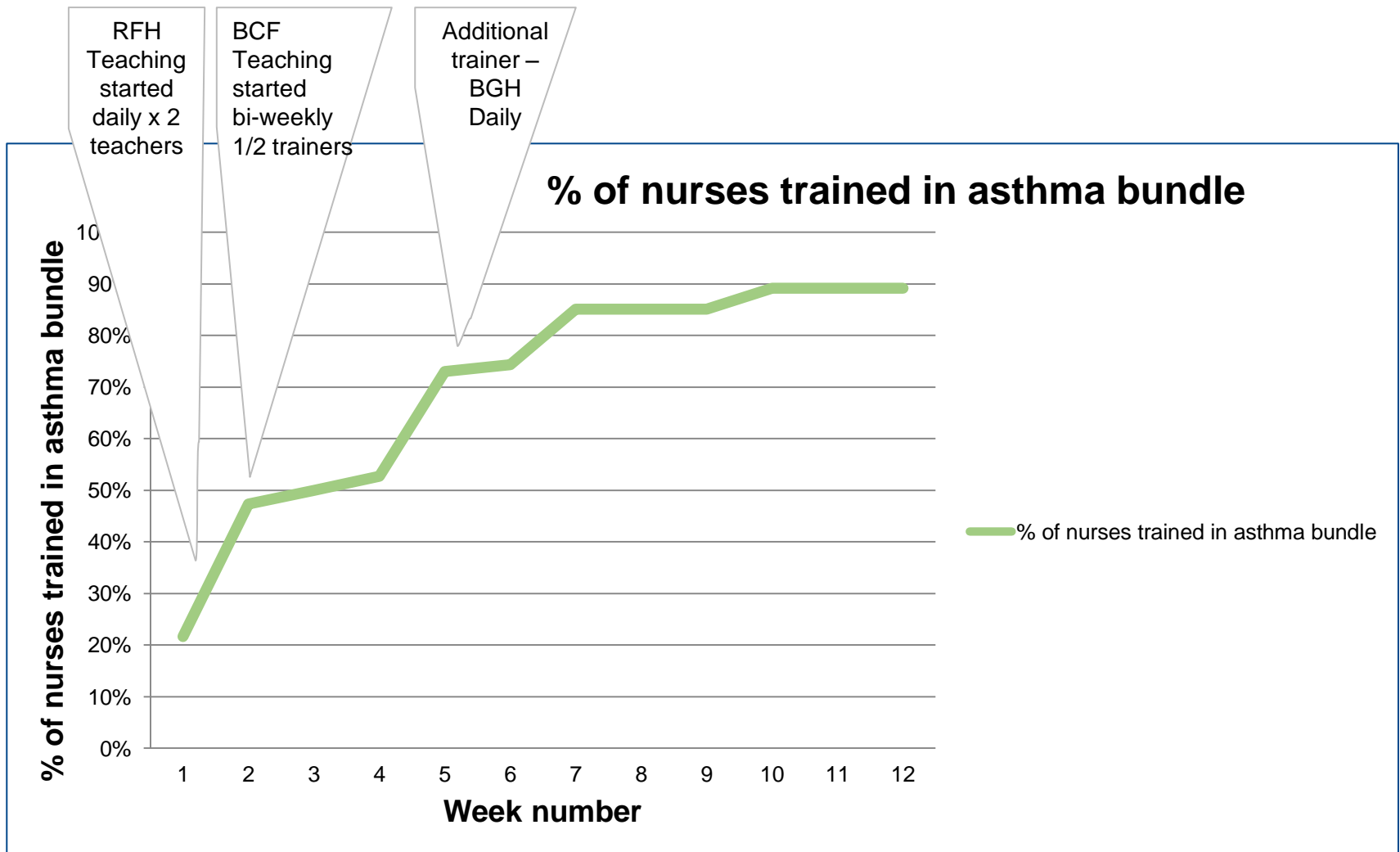
Progress chart – RFH



Progress chart – BCF



Progress chart – cross-site

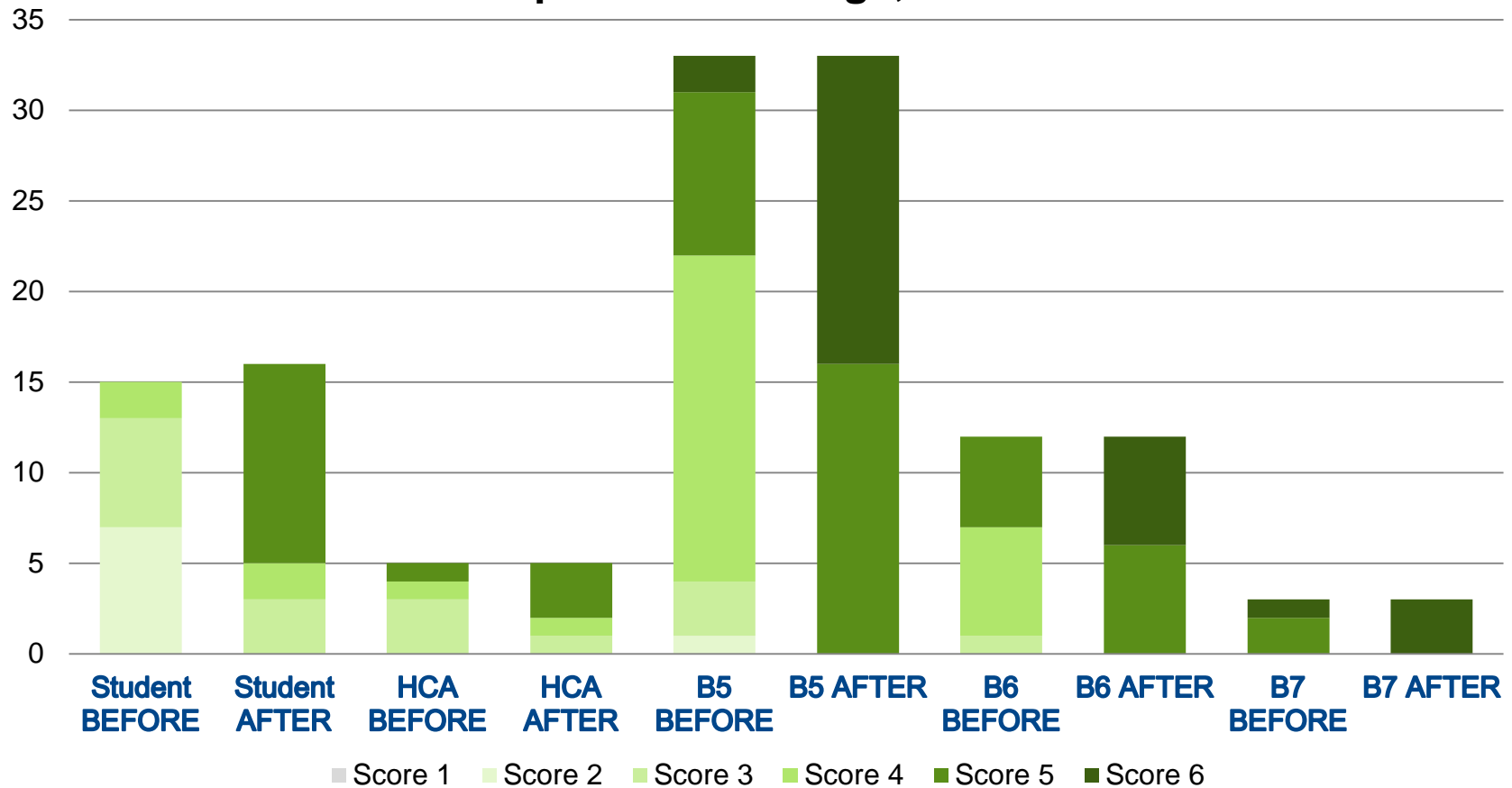


PDSA Outcomes

Week	Starting week	Total number of nurses trained so far	Eligible nurses number	% of nurses trained in asthma bundle	Interventions
1	09/01/17	16	74	22%	AK and CoS started Hampstead teaching. Requested mouthpieces for Hampstead site
2	16/01/17	35	74	47%	MC started BCF teaching, added smoking cessation and ACT. CoS reviewed smoking cessation referral. RM started helping on Galaxy ward,. MC wrote and circulated scenarios, scenarios and quiz revised based on feedback, revised evaluation sheet. AK guidance on PEFR. RMcC and KN observed MC. AK arranged Hampstead A&E training, care plans uploaded. KN started CF staff. Hampstead 58% complete. MC adapted PEFR chart, CoS commenced A&E staff.
3	23/01/17	37	74	50%	Reviewed asthma folder, Teachers observed AK teaching, PEFR Chart v1 circulated and added to folders. MC revised and standardised asthma folders.
4	30/01/17	39	74	53%	HN Revised care plan, resources sent to RMcC, asthma training update to RC
5	06/02/17	54	74	73%	V3 Asthma presentation circulated, RM trained Barnet and PAU staff, arranged asthma training for BGH A&E staff, ordered more PEFR meters for Galaxy, expanded smoking cessation section, Galaxy 60%
6	13/02/17	55	74	74%	
7	20/02/17	63	74	85%	
8	27/02/17	63	74	85%	
9	06/03/17	63	74	85%	
10	13/03/17	66	74	89%	
11	20/03/17	66	74	89%	
12	27/03/17	66	74	89%	Emailed reminder to A&E departments for rotas to plan training, CPEs unable to train remaining staff due to working in numbers, staff sickness and AL

Quantitative evaluation

Educational impact - Knowledge, skills and confidence



Qualitative evaluation 1

Trainers	Example feedback
Adama Kargbo, Asthma CNS	"Very good trainer and content was good" Band 6, A&E
Claire O'Sullivan, Clinical Practice Educator	"Enjoyed every bit of it and well presented" Band 6,
Michael Clift, Lead CPE	"Very happy about new asthma folder, feel a lot more confident and competent in having, discharging, discussing and treating asthmatics" Band 5
Kerry Neate, Allergy CNS	"A very enjoyable, interactive session" Band 5
Ronelle' Miguel, Senior Clinical Practice Educator	"Well taught, very informative and interactive. Thank you Ronelle." Band 6
Rachel McCann, Clinical Practice Educator	"felt much more confident now on giving advice to parents/children" HCA

Qualitative evaluation 2



Strengths

- Quizzes +
- Videos +
- Level of knowledge +

Improvements

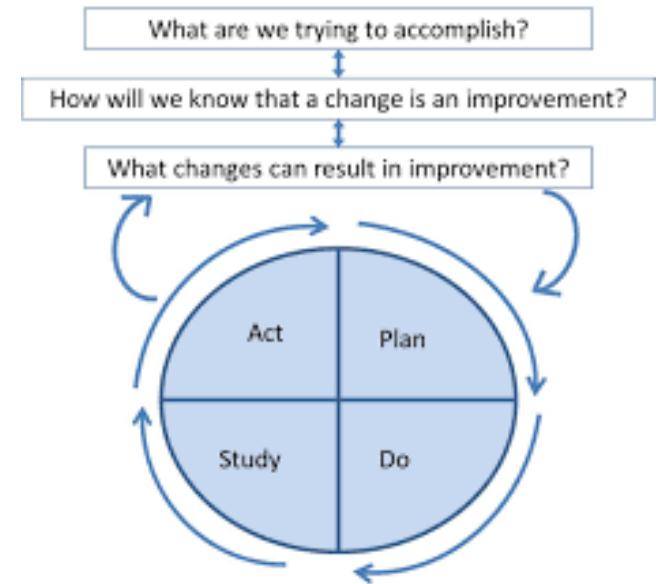
- More time to practice
- Education board
- HDU asthma training
- Asthma IV meds training
- Rewards
- More examples of medicines and aerochambers

Anecdotal evaluation

- CASE 1- A student nurse independently commenced peak flows on an asthmatic patient overnight
- CASE 2 - Nursing staff challenged SpR to re-assess patient being assessed for discharge post ward round as peak flows 50% of predicted. Patient developed O2 requirement. Required burst therapy

PDSA Improvements

- Improved teaching package
- Improved PEFr chart
- Updated care plan
- PEFr meters and filters stocked - cross-site
- Asthma folders - all clinical areas
- Increase in smoking cessation referrals
- Involved play and school staff in clinical teaching



Challenges

- Unclear aim
- Challenging targets e.g. 48 hr f/u
- MDT meeting and approach needed
- Buy-in/engagement at start
- Lack of resources at start
- Accurate measure of improved patient outcomes



Strengths

- Cross-site harmonisation
- Improved resources
- Improved MDT communication
- Good nursing engagement
- High-quality, effective, interactive teaching package



Going forward

- Continue nurse asthma teaching to achieve 100%
- Complete training of paediatric A&E nurses
- Competency assess after 3-6 months
- Assist in roll-out to medical staff
- Continue education project



Further development

- Pathway for referral to Asthma nurse at Hampstead
- Nurses to attend asthma clinic on orientation
- Audit compliance with clinical management standards
- Audit smoking cessation referrals
- Drs and nurses to attend asthma clinic
- Evaluate patient outcomes
- Widen education project



Questions?



Nurse Asthma Teaching

- Summary:
 - Drivers
 - Training plan
 - Teaching package
 - Evaluation
 - Going forward